

**In the Supreme Court of Missouri
Board of Law Examiners
APPLICATION FOR BAR EXAMINATION**

TYPE ALL ANSWERS

Registration Number _____

for Office Use Only

CHECK ALL APPLICABLE STATEMENTS:

I request to take the Missouri bar examination in February _____ July _____ of 20____

This will be my first time to take the bar examination in Missouri.

This is an application to Retake the Bar Examination. I previously took the Missouri bar exam in _____
(list all prior exams):

I previously filed an Application for Bar Examination but didn't take the exam in: _____

I am seeking reinstatement under Rule 5.28 because of disbarment.

CHECK THE APPLICABLE STATEMENT:

I previously filed an Application for Character and Fitness Report in (month/year): _____

I did NOT previously file an Application for Character and Fitness Report and I submit one herewith.

NOTE: If you previously filed within the past 36 months an Application for Character and Fitness Report and are not submitting one with this application, you MUST complete the C&F Update Affidavit and provide a new Authorization and Release (both forms can be found at the end of this application).

CHECK AND COMPLETE THE APPLICABLE PARAGRAPH:

I currently am a law student at _____ law school. I
expect to complete the requirements for the juris doctorate degree in _____ (month/year).
I have completed the juris doctorate degree and graduated from
law school in _____ (month/year).

NOTE: You must submit an official transcript certifying your J.D. degree and the date awarded. The transcript must be received by February 1 for a February exam or July 1 for a July exam. If an official transcript was submitted with a previously filed Application, it is not necessary to resubmit it.

1. NAME: _____ SSN: _____

2. Mailing Address: _____

Street Address: _____

City: _____

State: _____

Zip: _____

E-mail Address (if available): _____

Telephone: Home _____

Office _____

Other _____

NOTE: You are obligated to notify the Board of Law Examiners in writing if your mailing address changes. Any notice or correspondence from this office will be sent to your current mailing address of record.

3. Are you currently employed? YES NO
If YES, list the following:
Employer:
Employer's Address:
Employer's Phone Number:

4. Have you taken the Multistate Professional Responsibility Exam (MPRE)? YES NO
Date of MPRE Exam: Scaled Score:

Have you requested that your MPRE score be reported to Missouri? YES NO

NOTE: Rule 8.08(b) requires applicants to provide proof of a scaled score of not less than 80 on the MPRE. A certified score must be received by the Board no later than one year after the date of written notification of the applicant's successful completion of the bar examination. To request that your MPRE score report be certified to the Missouri Board of Law Examiners, contact: NCBE, MPRE Records Dept., PO Box 451, Iowa City, IA 52243, telephone (319) 337-1304. Include in your request your SSN and the date you took the MPRE.

5. Have you taken the Multistate Bar Exam (MBE) in a state other than Missouri? YES NO
If YES, list: State Date

Do you request the Missouri Board of Law Examiners to accept your MBE score from an exam previously taken in another jurisdiction? YES NO

If YES, it is your responsibility to contact the jurisdiction in which you took the MBE to arrange to have your score transferred to Missouri.

NOTE: To be acceptable, the transferred MBE score must have been attained within 19 months preceding the Missouri bar exam, you cannot have previously failed the Missouri bar exam, and you must have passed the entire exam in the transferring jurisdiction. See Regulation 7 under Rule 8.08.

6. Do you authorize the Supreme Court of Missouri and the Board of Law Examiners to release your bar examination scores to your law school? YES NO

If YES, you should complete and sign the "Consent to Release Exam Scores" (page 4 of this application). NOTE: The "Consent to Release Exam Scores" is optional. If you have questions or concerns about whether to consent to release of your scores, please contact your law school.

7. Do you have a disability for which you are requesting accommodations to take the bar exam? YES NO

If YES, you must submit a **fully complete** Petition for Testing Accommodations and all required supporting documentation in accord with the exam filing deadlines. The Petition is available on our web page or by contacting the Office of the Board of Law Examiners, P.O. Box 150, Jefferson City, MO 65102; or by e-mail to mble@courts.mo.gov or telephone to 573-751-9814.

8. Do you plan to register for the Laptop Program? YES NO

If YES, you must register and download the required software to your laptop in accord with the instructions and deadlines posted on the web at www.mble.org.

Write verbatim the following statement in your usual handwriting in the space provided below:

“I certify that I am taking the Missouri bar examination for the sole purpose of seeking admission to the bar. I will not share any of the content of the Multistate Bar Examination with any individual, organization, or agency.”

I hereby swear (or affirm) under penalty of perjury, that all statements contained in this Application for Bar Examination are true and complete.

Dated: _____

Signature of Applicant (must be notarized)

STATE OF _____)

COUNTY OF _____)

SUBSCRIBED AND SWORN TO before me a notary public within and for said county and state.

Notary Public

[Seal or stamp must be affixed.]

Consent to Release Exam Scores

I hereby authorize the Supreme Court of Missouri and the Board of Law Examiners to release my bar examination scores to the proper officials at the law school listed below from which I graduated. I understand that this Consent is optional and that I am not required to sign. By signing, I voluntarily give my consent to this release of my scores. I hereby release, discharge, and exonerate the Supreme Court of Missouri, the Board of Law Examiners, and the agents, appointees of the Supreme Court and the Board from any and all liability arising out of this authorized release of my scores.

Dated: ____ / ____ / ____

Signature of Applicant

Please Type:

Applicant Name

Law School

Exam Date

Complete this C&F Update Affidavit AND the Authorization and Release that follows it **ONLY** if you previously filed an Application for Character and Fitness Report that you are updating

C&F UPDATE AFFIDAVIT

NAME:

SSN:

Answer the following questions to cover the time period since your last application or update was filed. For any "YES" answers, complete the specified FORM. If no FORM is requested in the question, provide an explanation in an ADDENDUM Form for any "YES" answers.

- A. Has your employment status changed or have you changed jobs? **FORM 8** YES NO
- B. Have you been suspended, disciplined, formally reprimanded, fired, asked to resign, or allowed to resign in lieu of discharge in connection with any employment? **FORM 8** YES NO
- C. Have you become a party to any non-criminal legal proceeding? **FORM 13** YES NO
- D. Have any judgments, decrees, liens, or orders been awarded or issued against you? YES NO
- E. Have you been cited, arrested, charged, summoned, or taken into custody for the violation of any law? **FORM 14** YES NO
- F. Have you been suspended, placed on probation, expelled, warned, reprimanded, or disciplined in any way for any academic or non-academic reason? YES NO
- G. Have you been disbarred, censured, placed on probation, reprimanded, or disciplined as an attorney, as a member of any profession, or as a holder of public office? YES NO
- H. Are there any pending charges, complaints, or grievances (formal or informal) against you as an attorney, as a member of any profession, or as a holder of public office? YES NO
- I. Do you currently have any disorder or condition (including but not limited to alcohol abuse, substance abuse, or a mental, emotional, or nervous disorder or condition) that in any way impairs your behavior, judgment, understanding, capacity to recognize reality, ability to function in school, work, or other important life activities, or ability to practice law in a competent or professional manner? **FORM 22** YES NO
- J. Regardless of whether asked about in Questions A - I above, has there been any change to any of the information sought or provided in your previously filed application? YES NO

If you marked "NO" to all of the questions above, write in your own handwriting in the space provided below the following statement: *I hereby certify that the answers to all of the questions in my previous Application for Character and Fitness Report remain true, complete, and accurate. I have no new information to provide.*

I hereby swear (or affirm) under penalty of perjury that all statements contained herein are true.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20____.

(Seal or stamp must be affixed)

Notary Public

AUTHORIZATION AND RELEASE

I, _____
First Name Middle Name Last Name SSN
born at _____ on _____
City State Date of Birth
having filed an application with the Supreme Court of Missouri seeking admission to the bar, hereby consent to have an investigation made as to my character and fitness for the practice of law and such other relevant information as may be requested. I understand that the contents of my character and fitness investigation report are confidential and will be used by the Supreme Court of Missouri, its appointees and agents of its appointees, including but not limited to the Board of Law Examiners, the Office of the Board of Law Examiners, and the Division of Character and Fitness Investigations, for determining my character and fitness for admission to the bar.

I authorize and request every person, firm, company, corporation, credit reporting agency, governmental agency, law enforcement agency, court, bar association, and any other institutions having control of any documents, records and other information pertaining to me, to furnish to the Supreme Court of Missouri, its appointees and agents of its appointees, any information, including but not limited to records, documents, credit reports or records, arrest or incident reports, records of professional associations or licensing or disciplinary entities concerning charges or complaints filed against me, including any complaints erased by law, whether formal or informal, pending or closed, or any other pertinent data, and to permit the Supreme Court of Missouri, its appointees and agents of its appointees, to inspect and make copies of such documents, records and other information.

I further authorize all such persons as set out above to answer any inquiries, questions, or interrogatories concerning the undersigned submitted to them in writing or orally by the Supreme Court, its appointees and agents of its appointees.

I authorize the National Personnel Records Center, St. Louis, Missouri, or other custodian of my military record to release to the Supreme Court of Missouri, its appointees and agents of its appointees, information or photocopies from my military personnel and related medical records. This could include a photocopy of my Form DD214, Report of Separation.

I hereby release, discharge and exonerate the Supreme Court of Missouri, its appointees and agents of its appointees, and any person furnishing information, documents, or records pursuant to this Authorization and Release from any and all liability of every nature and kind arising out of their participation in the investigation made by the Supreme Court of Missouri, its appointees and agents of its appointees.

I further consent and authorize that a photocopy of this Authorization and Release may be accepted in lieu of an original.

Signature of Applicant

State of _____)
County of _____)
Subscribed and sworn to before me this _____ day of _____ 20_____.

[Seal or stamp must be affixed.]

Notary Public